

DFW

PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

5

Application Number

10/810,969

Filing Date

03/26/2004

First Named Inventor

Wendell A. GURTLE

Art Unit

3611

Examiner Name

Daniel S. YEAGLEY

Attorney Docket Number

2-5800-004

ENCLOSURES (Check all that apply)

☐

Fee Transmittal Form

☐

Fee Attached

☐

Amendment/Reply

☐

After Final

☐

Affidavits/declaration(s)

☐

Extension of Time Request

☐

Express Abandonment Request

☒

Information Disclosure Statement

☐

Certified Copy of Priority Document(s)

☐

Reply to Missing Parts/Incomplete Application

☐

Reply to Missing Parts under 37 CFR 1.52 or 1.53

☐

Drawing(s)

☐

Licensing-related Papers

☐

Petition

☐

Petition to Convert to a Provisional Application

☐

Power of Attorney, Revocation Change of Correspondence Address

☐

Terminal Disclaimer

☐

Request for Refund

☐

CD, Number of CD(s) _____

☐

Landscape Table on CD

☐

After Allowance Communication to TC

☐

Appeal Communication to Board of Appeals and Interferences

☐

Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

☐

Proprietary Information

☐

Status Letter

☐

Other Enclosure(s) (please identify below):

Remarks

FEE TRANSMITTAL FOR FY 2006, Form PTO/SB/17, with authorization to the fee of \$180, if necessary, to Deposit Account 08-1650; SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT AND CERTIFICATION PURSUANT TO RULE \$1.97(c)(1), consisting of one sheet; INFORMATION DISCLOSURE STATEMENT BY APPLICANT, Form PTO/SB/08B; and copy of one Reference - one sheet.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

STURM & FIX LLP

Cust. No. 00803

Signature

Michael O. Sturm

Printed name

Michael O. Sturm

Date

02/02/2006

Reg. No.

26,078

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Vicki J. Shepherd

Typed or printed name

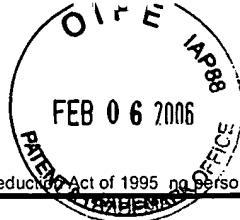
Vicki J. Shepherd

Date

February 2, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2006

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

Complete if Known

Application Number	10/810,969
Filing Date	03/26/2004
First Named Inventor	Wendell A. GURTLE
Examiner Name	Daniel S. YEAGLEY
Art Unit	3611
Attorney Docket No.	2-5800-004

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 08-1650 Deposit Account Name: STURM & FIX LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=	

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Fee Code 1806 Submission of Information Disclosure Statement

Fees Paid (\$)

\$ 180.00

SUBMITTED BY

Signature	<i>Michael O. Sturm</i>	Registration No. (Attorney/Agent) 26,078	Telephone 515-288-9589
Name (Print/Type)	Michael O. Sturm		Date 02/02/2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Wendell A. Gurtler

Serial No. 10/810,969

Group Art Unit 3611

Filed: March 26, 2004

Examiner: Daniel S. Yeagley

For: TRAILER HITCH CUSHIONING DEVICE
AND METHOD FOR USING SAME

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT
AND CERTIFICATION PURSUANT TO RULE §1.97(c)(1)**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant herein respectfully submits the enclosed Supplemental Information Disclosure Statement by Applicant (Form PTO/SB/08B).

I hereby certify, pursuant to 37 CFR §1.97(e)(2), that the prior art contained in this information disclosure statement was not known more than three months prior to the filing of this statement.

Respectfully submitted,

WENDELL A. GURTLER

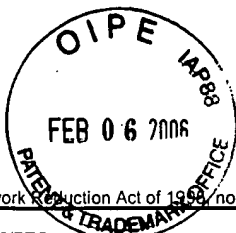
02/07/2006 NNGUYEN1 00000013 081650 10810969

01 FC:1806 180.00 DA

By: _____

Michael O. Sturm
Reg. No. 26,078

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PTO/SB/08B (07-05)

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Substitute for form 1449/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete if Known

Application Number	10/810,969
Filing Date	03/26/2004
First Named Inventor	Wendell A. GURTLE
Art Unit	3611
Examiner Name	Daniel S. Yeagley
Attorney Docket Number	2-5800-004

Sheet 1 of 1

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	1.	BOB SAGEN, The Story of Travel Lite and the Air Shocker, Shockerhitch. com website, original date of publication unknown	

Examiner
SignatureDate
Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.
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